

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | W | 71534 | 01-2-00 |
| O.I.P.E. CLASSIFIER | | 43 | 4/12/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 60521 | 01-19-00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet her

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